The change in factor VIII therapy since the introduction of mandatory pharmacy reporting in the GSAV in Germany – a retrospective data analysis from smart medication ScanDoc over 3 years

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Introduction

Since the introduction of the long acting recombinant factor VIII preparations (LArFVIII) and the monoclonal antibodies (mAB), these product classes are increasingly replacing the previously used plasmatic (pdFVIII) and short acting recombinant factor preparations (SArFVIII). Starting in 9/2020 factor dispensing is documented in about 100 specialized hemophilia pharmacies with the smart medication ScanDoc software tool. The retrospective analysis of documentation shows the change over time in product classes in Germany.

Method

With the introduction of the GSAV in 2019 and the elimination of the special distribution channel directly through haemophilia centers, factor preparations are provided to patients exclusively through pharmacies. The reporting obligation of the pharmacy to the prescribing physician (regulated in ApBertrO) starting in 9/2020 has since been supported by the smart medication ScanDoc software tool and is used in about 100 pharmacies in Germany. The present analysis covers a period of 37 months (9/2020 - 9/2023) with a total of 22794 prescription records. The pharmacy sales price (AVP) of the dispensed factor preparations amounts to almost EUR 630 million.

Results

Since 9/2020 the following changes could be observed (see fig.1):

- LArFVIII
- increase of total AVP from 18% to 30% (+ 12%)
- **■**mAB

increase of total AVP 12% to 30% (+17%)

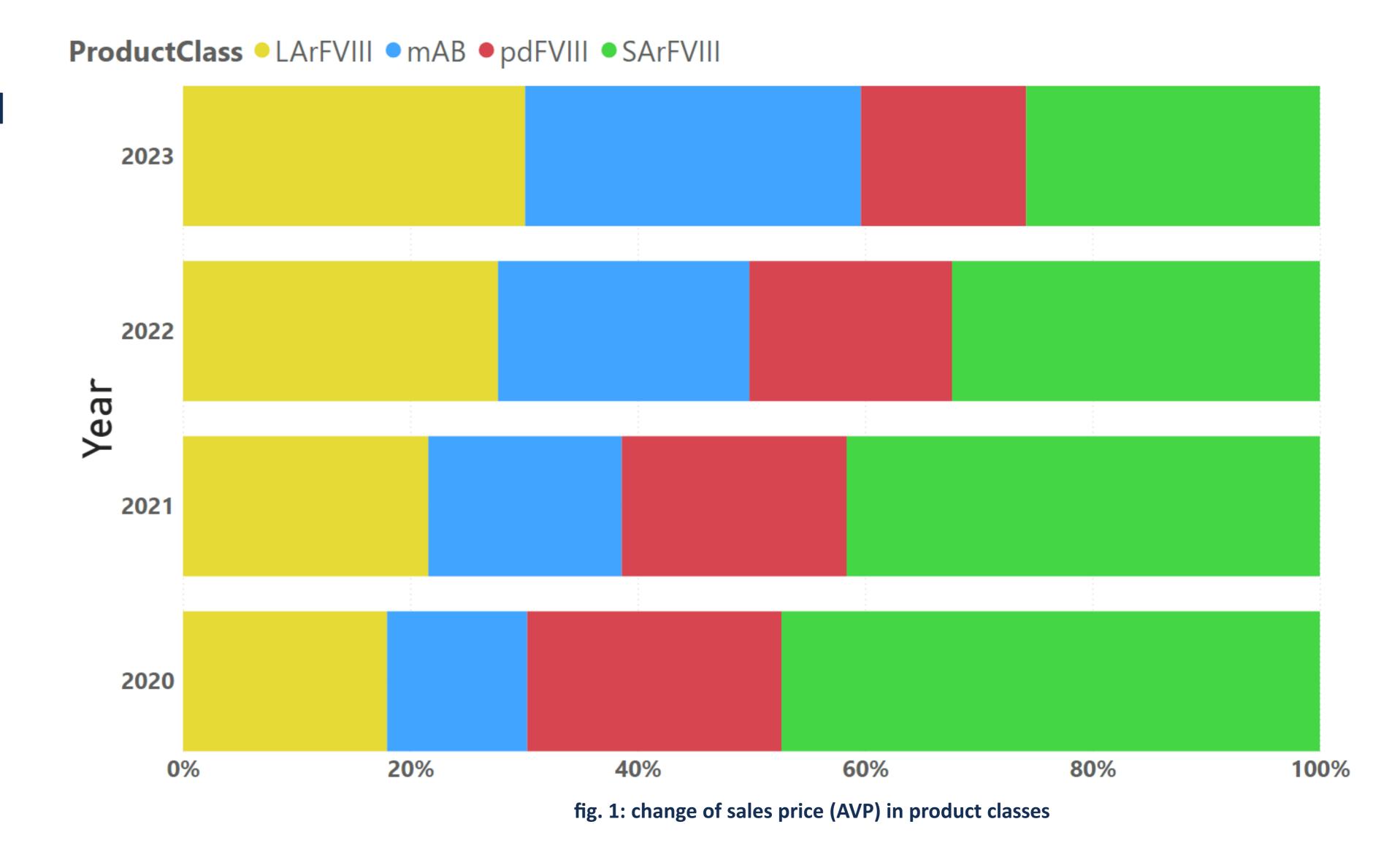
pdFVIII

decrease of total AVP from 22% to 15% (- 8%)

SArVFIII

decrease of total AVP from 47% to 26% (- 22 %)

(AVP = Apothekenverkaufspreis, pharmacy sales price)



Conclusion

The retrospective data analysis shows that the modern therapy options (LArFVIII, mAB) are gradually replacing the previously established preparations (pdFVIII, SArFVIII). SArVFIII preparations declined with -22% and pdVFIII with -8% in total value over the observation period of 37 months. Interestingly, the decline of pdFVIII preparations is significantly slower than that of SArVFIII preparations. In contrast modern therapy options each increased by +12% (LArVFIII) and +17% (mAB) in total value. Back in 2020 classical therapy options (pdFVII, SArFVIII) still accounted for 70% of the total value, but in 2023 modern therapy options (LArFVIII, mAB) already have a share of 60% with a still increasing relevance.

